



PART B - FEE(S) TRANSMITTAL

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23552 7590 06/17/2003

MERCHANT & GOULD PC
P.O. BOX 2903
MINNEAPOLIS, MN 55402-0903

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| | |
|--------------------|--------------------|
| KATE GANNON | (Depositor's name) |
| Kate G | (Signature) |
| SEPTEMBER 15, 2003 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/967,316 | 09/28/2001 | Bruce R. Musolf | 2316.1605US01 | 4270 |

TITLE OF INVENTION: FRONT ACCESS DSX ASSEMBLY

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1300 | \$300 | \$1600 | 09/17/2003 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-------------------|----------|----------------|
| PATEL, TULSIDAS C | 2839 | 439-668000 |

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- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Merchant & Gould P.C.

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ADC TELECOMMUNICATIONS, INC.

Eden Prairie, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature)

(Date)

Kate G *Sept. 15, 2003*

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09/18/2003 DERHANU2 00000104 09967316

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